

<h2 style="margin: 0;">TRANSMITTAL FORM</h2> <p style="font-size: small; margin: 5px 0;">(to be used for all correspondence after initial filing)</p>	Application Number	10/500,096 (Conf. No. 7642)
	Filing Date	January 11, 2005
	First Named Inventor	Hendrix et al.
	Art Unit	1644
	Examiner Name	Kamal A. Saeed
	Attorney Docket Number	LeA35821 [81477(303989)]
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Other Enclosure(s) (please Identify below):  (a) Certification of English Translation of DE 3810552 A1
<div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div> Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	EDWARDS ANGELL PALMER & DODGE LLP		
Signature	/Gabriel J. McCool/		
Printed name	Gabriel J. McCool		
Date	July 7, 2008	Reg. No.	58,423

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).	
Dated: July 7, 2008	Electronic Signature for Gabriel J. McCool (Reg. No. 58,423): /Gabriel J. McCool/

<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. LeA35821 [81477(303989)]	
Application No. 10/500,096 (Conf. No. 7642)		Filing Date January 11, 2005		Examiner Kamal A. Saeed	
Art Unit 1626					
Applicant(s): Hendrix et al.					
Invention: 2-HETEROARYLCARBOXYLIC ACID					
<b>TO THE COMMISSIONER FOR PATENTS</b> Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
<b>Total Claims</b>	42	- 20 =	22	x 50.00	1100.00
<b>Independent Claims</b>	17	- 3 =	14	x 210.00	2940.00
<b>Multiple Dependent Claims (check if applicable)</b> <input type="checkbox"/>					
<b>Other fee (please specify):</b> Information Disclosure Statement submission					180.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					<b>4220.00</b>
<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Large Entity  <input type="checkbox"/> No additional fee is required for this amendment.  <input checked="" type="checkbox"/> Please charge Deposit Account No. <u>04-1105</u> in the amount of \$ <u>4220.00</u>.         </div> <div> <input type="checkbox"/> Small Entity         </div> </div> <div style="margin-top: 10px;"> <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.  <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.  <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1105</u> as described below.         </div> <div style="margin-left: 40px; margin-top: 5px;"> <input checked="" type="checkbox"/> Credit any overpayment.  <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.         </div>					
/Gabriel J. McCool/ Gabriel J. McCool Attorney/Agent Reg. No.: 58,423  EDWARDS ANGELL PALMER & DODGE LLP P.O. Box 55874 Boston, Massachusetts 02205 (203) 353-6875				Dated: <u>July 7, 2008</u>	
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4). Dated: July 7, 2008      Electronic Signature for Gabriel J. McCool (Reg. No. 58,423): /Gabriel J. McCool/					